


Image


2811

PTO/SB/21 (08-00)

|  |                             |                               |           |
|--|-----------------------------|-------------------------------|-----------|
| <b>TRANSMITTAL<br/>FORM</b><br><br><i>(to be used for all correspondence after initial filing)</i> | <b>Application Number</b>   | 10/026,802                    |           |
|  | <b>Filing Date</b>          | December 27, 2001             |           |
|  | <b>First Named Inventor</b> | Hisashi OHTANI et al.         |           |
|  | <b>Group Art Unit</b>       | 2811                          |           |
|  | <b>Examiner Name</b>        | J. Im                         |           |
| <b>Total Number of Pages in This Submission</b>  |                             | <b>Attorney Docket Number</b> | 0756-2415 |

| ENCLOSURES <i>(check all that apply)</i>   |   |  |
|--|---|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form<br><input checked="" type="checkbox"/> Fee Attached<br><input checked="" type="checkbox"/> Amendment / Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Response to Missing Parts/Incomplete Application<br><input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment Papers <i>(for an Application)</i><br><input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Declaration and Power of Attorney<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address<br><input checked="" type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication to Group<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i><br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input type="checkbox"/> Other Enclosures<br>1.<br>2.<br>3.<br>4.<br>5.<br>6. |
| <b>Remarks</b>   |   | <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 50-2280 for the above identified docket number.   |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT |  |
|--|--|
| Firm<br>or<br>Individual name              | Eric J. Robinson, Reg. No. 38,285<br>Robinson Intellectual Property Law Office, P.C.<br>PMB 955<br>21010 Southbank Street<br>Potomac Falls, VA 20165 |
| Signature                                  |   |
| Date                                       | November 18, 2003  |

| CERTIFICATE OF MAILING  |   |      |                   |
|---|---|------|-------------------|
| I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date indicated below. |   |      |                   |
| Type or printed name  | Rose M. Fichtel   |      |                   |
| Signature   |  | Date | November 18, 2003 |

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